



## PART B - FEE(S) TRANSMITTAL

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 Commissioner for Patents  
 P.O. Box 1450  
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000128 7590 05/16/2006

HONEYWELL INTERNATIONAL INC.  
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Paul D. Amrozowicz	(Depositor's name)
	(Signature)
	7/28/06
	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/648,457	08/26/2003	Kenneth Hooker	H0004404	5092

TITLE OF INVENTION: TWO STAGE SOLENOID CONTROL VALVE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	08/16/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
KRISHNAMURTHY, RAMESH	3753	137-625640

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, 02 FC:1504 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	1 Ingrassia Fisher & Lorenz 1 100.00 DA
<input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	2 300.00 DA 3 _____

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Honeywell International, Inc.

Morristown, NJ

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are enclosed:

- Issue Fee  
 Publication Fee (No small entity discount permitted)  
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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-2091 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

- b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(e)(2).

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Authorized Signature

Date

7/28/06

Typed or printed name Paul D. Amrozowicz

Registration No. 45,264

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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## FACSIMILE TRANSMITTAL SHEET

TO:	FROM:
Mail Stop ISSUE FEE	Paul D. Amrozowicz, Reg. No. 45,264
COMPANY:	DATE:
USPTO	FRIDAY, JULY 28, 2006
FACSIMILE NUMBER:	TOTAL NO. OF PAGES INCLUDING COVER:
571-273-2885	2
PHONE NUMBER:	SENDER'S REFERENCE NUMBER:
	H0004404
RE:	RECIPIENTS REFERENCE NUMBER:
Payment of Issue Fee	10/648,457

URGENT FOR REVIEW PLEASE COMMENT PLEASE REPLY PLEASE RECYCLE

## NOTES/COMMENTS:

**FORMAL COMMUNICATION INTENDED FOR  
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